



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3096

<b>SERIAL NUMBER</b> 10/659,552	<b>FILING OR 371(c) DATE</b> 09/10/2003 <b>RULE</b>	<b>CLASS</b> 602	<b>GROUP ART UNIT</b> 3743	<b>ATTORNEY DOCKET NO.</b> DAT104B
------------------------------------	---	---------------------	-------------------------------	---

## APPLICANTS

Anthony T. D'Amico, Troy, MI;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/409,519 09/10/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*

\*\* 12/02/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 28	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>Alan Brandt</i> Initials <i>AB</i>				

## ADDRESS

32299

## TITLE

Traction device for physical therapy

<b>FILING FEE RECEIVED</b> 587	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit